Name in Full

Certificate of Death

Mrs Alice E. Adams

Died at Town Easton County Talbot MARYLAND

Date 19 07 Month 1 Day 11 | Age Y. 64 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 6

Husband of Wife Right Rev. Chas. Forbes Adams

Father's Name Jos. McAllen Mother's Maiden Name

Cause of Death: Primary Pleuro pneumonia 7 d | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Attending Nurse 1-18

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 70008

Name in Full William Anderson

Certificate of Death

Town Denton County Talbot

Died at Denton MARYLAND

Month Day | Y. M. D. | Native of | Occupation

Date 19 00 1 25 | Age 67 | | Merchant

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ Widower Number of children living

Husband of

Wife

Father's Name

Mother's Maiden Name

Cause of Death { Primary Pneumonia 72 | How long sick 1 wk

Immediate | Accident, Suicide, Homicide

Reported by Denton Journal

Address

2-3-1900

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70808

Name in Full Paul Jennings Brown

Certificate of Death

Died at Town Easton County Talbot MARYLAND

Date 1900 Month Jany Day 28 | Age Y. 2 M. 1 D. — | Native of Md | Occupation —

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single Widower ~~Number of children living~~

Husband of —— Child

Wife

Father's Name Saml. T. Brown

Mother's Name Adelia J. Brown

Cause of Death: Primary Epilepsy

Immediate Effusion on brain

How long sick 12 hours

~~Accident, Suicide, Homicide~~

Reported by Julius A Johnson

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full

Certificate of Death

Ida Flanner

Died at — Town — County — MARYLAND

Talbot

Date ~~189~~ 1907 — Month: Jany — Day: 9 — Age: Y. 20 M. D. — Native of: Maryland — Occupation: 10

~~Male~~ Female — ~~White~~ Colored — Married — ~~Single~~ — ~~Widow~~ ~~Widower~~ — ~~Divorced~~ — Number of children living: None

~~Husband~~ of Wife: Gazia Flanner

Father's Name: 10 — Mother's Name:

Cause of Death — Primary: Pneumonia — How long sick: 1 day

Immediate — Accident, Suicide, Homicide

Reported by: L Z Russum Undertaker

Address: Trappe Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from Relatives of deceased

of .....

Name in Full ~~Wm. H.~~ Geo. Gale

Certificate of Death

Died at Town Easton County Talbot MARYLAND

Date ~~189~~ 1905 Month 1 Day 14 | Age Y. 62 M. D. | Native of | Occupation

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~

Number of children living 3

Husband ~~Wife~~ of Josephine Jump

Father's Name | Mother's Name

Cause of Death: Primary Paralysis 44 | How long sick

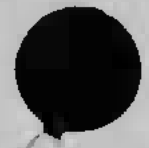
Immediate | Accident, Suicide, Homicide

Reported by Easton Ledger 1-18

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898



Name in Full Anna Hickey

Certificate of Death

Died at Town Cordova County Talbot MARYLAND

Date 19 ~~Dec~~ Month 1 Day | Age Y. 28 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | Widow Widower | Divorced Number of children living

Husband of

Wife

Father's Name

Mother's Maiden Name

Cause of Death { Primary 161 | Immediate

How long sick Short while

Accident, Suicide, Homicide

Reported by Denton Journal

Address

2-3-1900

Must be signed by physician, if any In attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78998

Name in Full

Certificate of Death

Mrs Priscilla Kennard

Town

County Talbot

Died at MARYLAND

Date 19 00 | Month 1 | Day 27 | Age Y. 98 M. D. | Native of | Occupation

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~ | Number of children living 2

Husband of Wife Nicholas Kennard

Father's Name | Mother's Maiden Name

Cause of Death: Primary 161 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Comet and Advertiser 1-29

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70888

Name In Full

Certificate of Death

Died near Town Hambletons County Talbot MARYLAND

Date 1900 Month / Day 28

Age Y. 0 M. 0 D. 15

Native of Talbot

Occupation —

Male / ~~Female~~

White / ~~Colored~~

~~Married~~ / Single

Widow / ~~Widower~~

~~Divorced~~

~~Number of children living~~

~~Husband~~ / ~~Wife~~ of

Father's Name Stebbins Franklin Neal

Mother's Name Annie Virginia Hambletons

Cause of Death — Primary: Constipation

How long sick 5 days

Immediate: Peritonitis

~~Accident~~, ~~Suicide~~, Homicide

Reported by Joseph A Roe M D

Address Trappe Tal- [redacted] Co Md-

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Name in Full — Celia Nichols — Certificate of Death

Died at — Town: Easton — County: Talbot — MARYLAND

Date: 1900 June 4th — Month Day | Age: Y. 80 M. — D. — | Native of: Del | Occupation: Housewife

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ / Widow / ~~Widower~~ — ~~Divorced~~ — Number of children living

~~Husband~~ / Wife of Alpha Nichols, dcd

Father's Name: — Mother's Name: — 81

Cause of Death — Primary: Senile Gastric Calamity — How long sick: 2 yr

Immediate: Exhaustion — ~~Accident, Suicide, Homicide~~

Reported by: Julius A Johnson

Address: Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, underteker or minister.

LIBRARY BUREAU, 79898

Name in Full Eva May Price

Certificate of Death

Died at Town Easton — County Talbot — MARYLAND

Date 19 Month June Day 17th | Age Y. 5 M. 11 D. — | Native of Md | Occupation —

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ | ~~Widow~~ ~~Widower~~ | Divorced ~~Number of children living~~

Husband of Wife —

Father's Name Willard H. Price | Mother's Maiden Name ~~Lizzie~~ S. Woodland

Cause of Death: Primary Bright's Disease — How long sick One year

Immediate Exhaustion 9 7 — ~~Accident, Suicide, Homicide~~

Reported by Julius A Johnson M.D.

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70898

Name in Full Jas. Ezekiel Daulsberry

Certificate of Death

Died at Town Zabriskie County MARYLAND

Date Apr Month May Day

Age	Y.	M.	D.	Native of	Occupation
	—	2	—	Md	—

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ Widower Divorced ~~Number of children living~~

Husband of —

Wife

Father's Name Jas E. Daulsberry

Mother's Name

Cause of Death — Primary Bronchio-Capilin

How long sick 4 days

Immediate

~~Accident, Suicide, Homicide~~

Reported by Julius A Johnson M.D.

Address Zabriskie Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 7989S

Name in Full

Certificate of Death

Annetta Thomas

Died at Town: Hillsboro County: Talbot MARYLAND

Date 1900 Month: Jan Day: 6

Age Y.: 21 M.: D.:

Native of: Maryland

Occupation:

~~Male~~ Female

~~White~~ Colored

Married ~~Single~~

~~Widow~~ ~~Widower~~

Divorced

Number of children living

~~Husband~~ Wife of Ike Thomas

Father's Name: Saml. Murray

Mother's Name: Rela Pratt

Cause of Death: Primary: Abcess inwardly

Immediate:

How long sick: 5 weeks

Accident, Suicide, Homicide

Reported by J Z Russum Undertaker

Address Hillsboro Md

Must be signed by physician, if any in attendance, otharwise by coroner, undertaker or ministar.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name in Full

Lawrence Wagoner Trickle

Certificate of Death

Died at Town: Easton County: Talbot MARYLAND

Date 1900. Month: Jan Day: 23

Age Y. 3 M. 6 D. 9

Native of: Indiana

Occupation: Infant

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ Divorced ~~Number of children living~~

~~Husband~~ Wife of

Father's Name: C. Edward Trickle

Mother's Name: Elizabeth White

Cause of Death: Primary: Acute Gastritis

How long sick: ~~Months~~ 1 day

Immediate: Shock

~~Accident, Suicide, Homicide~~

Reported by: Joseph S Gannon M.D.

Address: Easton, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968

Name in Full Samuel D. Yeo — Certificate of Death

Died at Town: Sea Easton — County: Talbot — MARYLAND

Date 1900 Month: Jany Day: 10th | Age Y. 71 M. 11 D. | Native of Md | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 3

Husband of
Wife

Father's Name

Mother's Name

Cause of Death: Primary Pneumonia — Immediate Exhaustion — How long sick 2 months

~~Accident, Suicide, Homicide~~

Reported by Julius A. Jump M.D

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898